
EXECUTIVE SUMMARY – INNER-CITY SYDNEY ABORIGINAL HOMELESS PROJECT

Introduction (Research Aims and Methods)

The Inner-City Sydney Aboriginal Homeless Research Project was commissioned by the New South Wales Government's Aboriginal Housing Office (AH0) as a part of the *Partnership Against Homelessness* initiative, which was established to "co-ordinate and improve a wide range of housing and support services for homeless people" (NSW, Dept of Housing, 2002A). Its detailed aims were to:

- (1) To investigate types of inner-city Aboriginal homelessness;
- (2) To map pathways for Aboriginal persons/families/groups in the inner-city into, within and out of homelessness;
- (3) To provide strategies to address immediate and on-going accommodation, support or other needs expressed by participants;
- (4) To identify effects of government policies on Aboriginal persons experiencing homelessness in the inner-city;
- (5) To train Aboriginal researchers so as to build research capacity; and
- (6) To inform the Partnership Against Homelessness to support the implementation of targeted projects to address the needs of homeless men and women and to inform the homeless service system generally. (NSW Aboriginal Housing Office, 2004, p. 2.)

At the outset of research work in May 2004 a number of potentially relevant groups and territories had been defined through the research team's previous experience of the study area (refer to Figure A following). As fieldwork progressed, social profiles of a number of distinct Aboriginal homeless groups subsisting in the inner city Sydney area at the time of the survey began to emerge. By the end it was possible to describe the existence and social characteristics of six groups:

1. Redfern/Waterloo dwellers (Group A);
2. Newton dwellers (Group B);
3. Central Railway Station dwellers (Group C);
4. City/Town Hall dwellers (Group D);
5. Kings Cross/Darlinghurst dwellers (Group E);
6. Broadway/Glebe dwellers (Group F).

[Note: A written profile was composed for each of these groups and is included at the beginning of Chapter 4. A map showing the physical relationship between the general territorial ranges of each group accompanies these descriptions.]

The research project tasks included literature review and analysis, interview data collection and analysis, compilation of service provider profiles, and collation of data and literature in a report. Paul Memmott & Associates had compiled a large body of published and unpublished literature on Indigenous homelessness during a number of significant recent projects which it had conducted. This collection was drawn upon for the literature analysis contained in the current report, and is included in its bibliography. The profiles of service provider organisations were compiled using notes from a number of stakeholder workshops and interviews, a collection of relevant literature, and resources available online. The profiles were given to the relevant contacts for review and comment.

A total of 53 homeless persons were interviewed using either of two questionnaires designed for use during this project (refer Appendix 1). The field team was able to effectively target six people for follow-up interviews. Five agreed to have their interview sessions recorded on cassette tape. In addition to these one-on-one structured interviews, informal interviewing occurred to aid the development of the homeless group profiles, addressing such issues as group identity, territory ('beat'), accessed services and perceived lifestyle issues. It was required that the field research be qualitative, incorporating aspects of participatory action research and narrative data gathering. The process was also reflexive, allowing for changes to be incorporated as work proceeded and as new insights emerged into how best to gather and analyse the information being received. The locally based field researchers were employed to engage with the relevant communities and potential participants over a period of six months. Two Aboriginal research assistants were employed as field workers: Mr Richard Green of the Daruk language group and Ms Pam Ingram of the Wiradjuri language group. Both were long-term residents of inner city Sydney and familiar with its Aboriginal community. Their team leader was Ms Angela Pitts, a part-time social planning consultant to the Aboriginal Housing Company in Redfern who was also carrying out doctoral research at the University of Sydney.

As the project evolved, the Aboriginal Housing Office established two committees. The first was called the Project Steering Committee comprising representatives of a range of Aboriginal, non-government and local authority agencies providing services to homeless people in Sydney. The second was called the Reference Group and comprised Aboriginal representatives from both government and NGO agencies.

The project brief required that field researchers respond directly to the requests and apparent needs of the Aboriginal homeless people interviewed, in regards to accommodation and support, by referring them to services or agencies in a manner guided and informed by the Project Advisory Committee. To achieve this goal, interviewees were invited to complete an Agency Referral Form,

which was to be forwarded through the Aboriginal Housing Office to the particular agency for action.

Categories of Indigenous Homelessness

This section contains a summary of the findings from a survey of the relevant literature and various responses to Indigenous public place dwelling and homelessness across Australia that was conducted during 2002 (Memcott, Long & Chambers 2002). This extensive work has generated three categories of Indigenous homelessness—public place dwellers, those at-risk of homelessness (also known as ‘hidden homelessness’), and the spiritually homeless—which are described in the table following. The work also generated a list of 15 ‘response types’, a term that the authors employ to refer to a broad range of initiatives including philosophies, policies, programs, services, strategies, methodologies, legislations and activities that are aimed at addressing the needs of Indigenous people who are homeless and/or residing in public places. [The response categories used for this study were: Legislative (Policy) and Police Approaches, Patrols and Outreach Service, Diversionary Strategies, Addressing Anti-social Behaviour, Philosophies of Client Interaction, Alcohol and Drug Strategies, Regional Strategies, Accommodation Strategies, Dedicated Service Centres and Gathering Places, Physical Design of Public Places, Education Strategies for Non-Indigenous People, Phone-in Services, Skills and Training for Field and Outreach Workers, Partnerships and Holistic Approaches.]

Table: Categories of Indigenous Homeless People

Note: These are not mutually exclusive categories.

1. PUBLIC PLACE DWELLERS.	Living in a mix of public or semi-public places (as well as some private places, which are entered illegally at night to gain overnight shelter) eg parks, churches, verandahs, carparks, drains, riverbanks, dilapidated buildings.
1.1 Public place dwellers – voluntary, short-term intermittent.	These people are often staying in conventional accommodation (eg a relative’s house) and may have their own residence in a rural or remote settlement. When they socialise in public urban places, they may or may not decide to camp out overnight, usually with others, despite the availability of accommodation.
1.2 Public place dwellers – voluntary, medium-term.	Residing continually in public places (including overnight); acknowledge they have another place of residence in a home community but uncertain if and when they will return.
1.3 Public place-dwellers – voluntary, long-term (chronic homeless).	Residing continually in public places (including overnight); it is unclear whether it is possible for such individuals to readily reconcile with their home community/family due to a range of emotional barriers; they have come to regard a beat of public places as their ‘home’.
1.4 Public place-dwellers - Reluctant and by necessity.	Residing continually in public places, and who (a) Wish to return home but need to remain in urban area due to a service need or to support a hospitalized relative or similar; or (b) Wish to return home but no funds for travel and/or capacity to organize travel.
2.0 THOSE AT RISK OF HOMELESSNESS / HIDDEN HOMELESSNESS	At risk of losing house or of losing the amenity of house.
2.1 Insecurely housed people. [Olive 1992, ABS 1999A.]	Residing in adequate housing but under threat of losing it; lack of secure tenure; possibly due to circumstances of poverty.
2.2 People in sub-standard housing. [Olive 1992.]	Persons whose housing is of a sub-standard architectural quality, possibly unsafe or unhealthy housing [but raises issue of cultural standards.]
2.3 People experiencing crowded housing. [Olive 1992: 2,3, Keys Young 1998:iv, Memcott 1991:258-261.]	Persons whose housing is crowded [but crowding should be defined as involving considerable stress (and not ascertained by density measures alone).]
2.4 Dysfunctionally mobile persons. [Olive 1992, Keys Young 1998, ABS 1999A, Berry et al 2001.]	In a state of continual or intermittent residential mobility incl. temporary residence (eg crisis accommodation) that is a result of personal and/or social problems (eg violence, alcohol and substance abuse, personality or ‘identity crisis’, lack of emotional support and security).
3.0 SPIRITUALLY HOMELESS PEOPLE. [Berry et al 2001:34-43, Keys Young 1998.]	A state arising from: (a) separation from traditional land, (b) separation from family and kinship networks, or (c) a crisis of personal identity wherein one’s understanding or knowledge of how one relates to country, family and Aboriginal identity systems is confused

Portrait of Inner City Sydney Aboriginal Homelessness

This brief portrait of the Aboriginal homeless of inner city Sydney, both public place dwellers and the insecurely housed (hidden homelessness), draws on the information contained in Chapters 4 and 5 of this report. The field research conducted as part of this study revealed that approximately six distinct Aboriginal homeless groups or ‘mobs’ operated in the inner city of Sydney (see previous listing). They quite frequently moved between areas, however, they largely operated within a set of clearly designated territories. They often functioned like a family unit, looking after one another’s personal possessions and safety. Each one identified strongly with the society of its members and exhibited a political dynamic. Certain protocols had to be observed when entering or engaging with the different groups.

The majority of the Redfern/Waterloo mob (Group A) socialised and gathered at the Block and the Redfern Post Office. Many

members slept rough at the Block, some constructing makeshift dwellings that were regularly removed by Council. Others made their way to family and/or squats around Newtown and Glebe. The key issues for the Block involved drug and alcohol consumption and drug-related crime. Most of the Newtown mob (Group B) were found to live in squats and frequently begged on King Street near the Newtown Square, and around Redfern railway station and its Post Office. They also socialised at the Square, the suburb's Post Office and on the Block. This group were considered a very tight knit family unit that shared all its resources. The majority were alcoholics. The Central Railway Station group (C) largely slept rough at Belmore Park, although some members slept in parks around Surry Hills and the city. Central Station was usually the first stop for transients arriving from outside of Sydney. While most moved off to find family and friends on the Block, some remained, particularly Queenslanders. The group was found to socialise and beg at Belmore Park and the railway station, but also in Newtown and Redfern. Again, the majority were alcoholics.

The City/Town Hall mob (Group D) slept rough at the Town Hall/Cathedral Square off George Street and in Hyde Park, also socialising in these locations. Some members slept at the Belmore and Domain Parks, while others were found begging at Circular Quay, Hyde Park and the Town Hall. Most were alcoholics. It was observed that some of this group socialised with people from their hometown or region. The Kings Cross/Darlinghurst group (E) slept at various places around the Kings Cross area, including Potts Point and Woolloomooloo. Some members slept under concrete car parks near St Mary's Cathedral, while others lived in squats around the city. Still more lived outdoors. They usually socialised and begged at Kings Cross and its railway station, Oxford Street and Taylor Square, and their main meeting place was the Wayside Chapel. The group's members were not all Aboriginal. Most were heroin users, however some used speed and cocaine. A number of homeless transvestites and transsexuals working along the Oxford strip were observed. They had arrived for the 2000 Olympic Games and stayed, and almost all were from north Queensland. The Broadway/Glebe mob (Group F) slept rough around the Broadway area or in squats around Glebe. They were found socialising and begging at Glebe Point Road, the Broadway Shopping Centre and at Central Railway Station. Those interviewed were alcoholics and had developed related mental illnesses. Group members mingled with others with medical conditions who gathered near the Royal Prince Alfred Hospital psychiatric ward and rehabilitation clinic.

Pathways Into Homelessness

Here a general description will be made of the homeless Aboriginal people interviewed for this study. It is followed by discussion on a number of factors that lead people into homelessness and prevent them from being able to readily change their circumstances. The sample of homeless people interviewed included 37 public place dwellers and 16 insecurely housed individuals. The majority were aged between 25 and 45 years, and were most often male. Public place dwellers were significantly more likely to have been in their situation for five years or more, while the large majority of the insecurely housed had been so for between one and a few years. The interview data also revealed that both categories of homeless people moved between these states during their overall homeless careers. Only two of the respondents who had lived rough in the past had also rented a room or been a tenant in a residential property in the past. None had ever actually been responsible for a lease. Only one of the public place dwellers interviewed had rented a room or boarded in the past. The remainder had been staying with friends or relatives when not living on the streets or in squats.

A clear majority of interviewees came from regional and rural New South Wales, a large proportion of them originating in communities inland from the east coast. Just over one fifth of respondents were from Sydney. As a destination, Sydney was thought to provide better chances for employment and education. Significantly, in leaving their home communities, people also sought the excitement of a large city and were drawn by the fame of the Redfern Aboriginal community. Some people were also escaping the turmoil being experienced in their home communities and the toll being taken by elders dying without anyone assuming their cultural roles and duties. A significant majority of the people from elsewhere preferred to remain in Sydney. Other things that attracted people into the inner city, included: (a) the existing homeless population with its valuable advice for newcomers, (b) an array of places to seek immediate shelter, and (c) the availability of a range of services compared to other areas.

Mental & Physical Illness

While the interview data revealed that almost a quarter of respondents had been diagnosed or were suspected of suffering from a mental illness, the researchers witnessed a greater incidence of this problem on the streets across all the groups identified. A significant majority were public place dwellers, and almost half of these had been so for five years or more. As well, just over half of the respondents declared they were suffering from a physical illness; the large majority again being public place dwellers. The age group experiencing the highest incidence of physical illness was the 35 to 45 years olds. Slightly fewer than 17% of respondents were both mentally and physically ill, the vast majority of these people being public place dwellers. The woman described in Case Study No. 1 (Chapter 5) not only experienced a number of ailments related to living rough in cold conditions, such as lung problems, but her homelessness had also made her depressed. This was made worse by unresolved feelings regarding the rape, which had brought her to Sydney. This woman's cousin (also CS1), suffered a number of illnesses related to his alcohol consumption and life on the streets, in particular a psychosis that remained undiagnosed and untreated. All the interviewees suffering from a mental illness endured their conditions without medication or ongoing treatment. People with this level of disability require close monitoring and support to enable them to change their circumstances. And many require assistance in the long-term to ensure they remained securely housed. Often parents with mental illness had significantly compounded the instability of their children's living arrangements and been a factor in their homelessness.

Alcohol & Drugs

Across all the groups, the majority of the Aboriginal homeless interviewed were found to be alcoholics and/or addicted to drugs. The analysis of interview data revealed that proportionally within the samples obtained, almost twice as many public place dwellers as the insecurely housed were alcohol dependent, the large majority being men. And another significant majority of people who had been either homeless or insecurely housed for ten years or more were alcohol dependent. The proportion of drug addicted public place dwellers was almost three times that of the insecurely housed. And again a clear majority of drug users were men. Almost 14% of the total number interviewed were both alcohol and drug dependent, and nearly three-quarters of the people in this category had been public place dwellers for ten years or more. The Chapter 5 case studies clearly demonstrate the destruction caused by alcohol and drug addiction, and most particularly the threat that these problems represent to achieving secure housing. Two of the eight interviewees depicted were confirmed alcoholics, and an additional one regularly consumed alcohol to socialise with her group but claimed she was not addicted. Two more were addicted to both alcohol and drugs and another two were addicted specifically to heroin. This means six to seven of the eight cases presented in Chapter 5 involved serious alcohol or drug abuse. It must be accepted that for people with a long history of drug or alcohol abuse, the path to stability will be long and must be attended carefully by outside support agencies, otherwise people will slip back into homelessness.

Violence & Crime

Many of the interviewees cited violence as being a serious risk to life as a public place dweller. The male researcher described the situation of a number of female public place dwellers who were continually the victims of sexual and physical abuse at the hands of male transients. The Chapter 4 discussion of group identities revealed that this was a common pattern for how homeless women were treated. The majority of women interviewed were on the streets either because of domestic violence or sexual abuse from a family member.

Insecure Housing (Hidden Homelessness)

This research reiterates the fact that the issues of insecure tenure, overcrowded and substandard housing stock, and dysfunctional mobility are intertwined; they interact with one another over the course of people's lives. These factors combine with the other symptoms of disadvantage such as poor physical and mental health, or the reduced ability to cope with such difficulties, drug and alcohol abuse, and involvement with the criminal justice system to keep people teetering on the edge of a life of public place dwelling. Many of the insecurely housed interviewed were living as boarders, a circumstance inherently prone to change. A boarder's security relies on the behaviour of the head tenant, visitors and other boarders, and on the actions of the dwelling's owner. And with the Aboriginal community's cultural preference for household visiting and hosting larger numbers of such household visitors for longer periods than the general Australian population, the actions of such visitors are often less subject to control. These people can also overburden services that were not designed for such high loads. As outlined in Chapter 2 the concept of overcrowding does not purely revolve around density but must incorporate both the numbers and characteristics of occupants that cause stress. Case Study No. 9 demonstrates the kind of factors that indicate a dwelling is overcrowded. A male interviewee came to Sydney to study and improve his employment prospects, and felt that his overcrowded dwelling made him feel homeless. Eleven people and numerous visitors occupied his house, and despite everyone being polite and considerate, there was no privacy for the household's regular members. This man felt strongly about the issue of overcrowding in Aboriginal communities and households, and warned that other interviewees would lie rather than face reprisals from housing authorities over this issue. With regards to substandard conditions, all of the case studies reported that their residences were in need of maintenance, had basic facilities such as toilets and showers that were not working or had been in urgent need of repair for an extended period in the past. [Refer to the following discussion of young people for a consideration of dysfunctional mobility.]

Racism

Both of the Aboriginal field researchers believed that racism played a significant part in the level of Aboriginal homelessness. Aboriginal people experience more discrimination from housing providers than the general Australian population, as well as having lower levels of literacy and numeracy. These factors keep people marginalised.

Young People

Both field researchers reiterated the need to consider how young people are drawn into homelessness and how it can affect their adult lives. Understanding this situation was seen as vital to halting the increase in homelessness in the study area. The male researcher described how homelessness and the social problems that help produce and perpetuate it work across generations. Parents can pass their drug habits onto their children but the example they set as drug dealers also has a huge effect. Case Study No. 2 most clearly illustrates where homelessness or the risk of it can begin, and how dysfunctional mobility emerges and can lead to public place dwelling lifestyle. This woman's circumstances also provide a stark warning about the effect which family violence and abuse can have on young lives, particularly when the levels at which these crimes are occurring in Indigenous communities throughout Australia are considered. Her case demonstrates the value of intervening effectively in lives where dysfunctional mobility and insecure housing are factors. Another aspect of homelessness that affects children involves the number of people who have minor children for whom their situation prevents them from taking an active parental role. Where relatives care for such children there is the potential for them to slide into dysfunctional mobility if the relatives are not properly supported.

Spiritual Homelessness

The female field researcher believed that the issue of 'Koori homesickness' needed to be more fully addressed. Such feelings added to the already depressed emotional state that Aboriginal homeless people find themselves in. The separation from family and community connections that these individuals experience can have serious effects on their mental health. This explains why people from elsewhere are known to congregate together. The two basic points of introduction for Koori people are where a person is from and which 'mob' they belong to. Therefore people collect in a suburb like Redfern, to be near people known to them.

Conclusion

The discussion above illustrates the pathways people follow into homelessness. Often they are drawn to inner city Sydney by positive factors, because of a desire to better themselves through education or improved employment opportunities, or because of an ambition to live in a more exciting place. Often people leave their home communities for negative reasons such as the lack of opportunities and services, or the levels of violence and social upheaval being experienced there. Once in Sydney they can find their housing situation tenuous for a number of reasons. Sometimes a lack of pre-planning is involved or racism on the part of the rental market. And when congregating in Redfern where problems such as drug and alcohol abuse are severe, people can be drawn into these lifestyles. Once engaged, people can find it very difficult to extricate themselves from them. And a host of physical and mental ailments ensue. As people spend longer abusing alcohol or drugs and living rough with untreated physical and mental illnesses it becomes more and more difficult to find a way out of their predicament. Mental illness can drive people into homelessness as it severely destabilises families and lives. Domestic and family violence can also be a factor that directly brings most often women and children into homelessness. Unsupported prison release is another factor. The above discussion highlights the kinds of homelessness that are hidden from view, and the numbers of people who experience overcrowding and dysfunctional mobility, as well as sub-standard housing conditions, and who are generally not included when the homeless population is being counted.

Pathways Out of Homelessness

All of the interviewees had been eager to find a solution to their homeless situation and none identified as voluntarily dwelling in public places. However, some of the respondents said that they may still choose to spend time socialising in the public place dwelling group with whom they affiliate, even if they were to obtain stable accommodation.

The interview data was generally less revealing about potential pathways out of homelessness. Respondents were not as forthcoming or knowledgeable about how others of their acquaintance had accessed and/or maintained stable housing. And the research team did not have the capacity to investigate whether the examples provided had truly remained in secure accommodation. The majority of interviewees that did respond to this question believed that people had received help through the NSW Department of Housing but provided no further details. But certain conclusions can be drawn from the interviews and the pathways into homelessness that were identified. These can be considered in light of what previous research has revealed about successful strategies for dealing with Aboriginal homelessness. The case studies regarding young people reveal the importance of intervening early in situations where mental illness, unstable custodial arrangements or family violence are factors. These are serious concerns considering the level at which they are occurring in Aboriginal communities throughout Australia. With regard to mental illness and the effects of long-term alcohol and drug abuse, the previous discussion shows that intensive case management and ongoing support is vital to keeping people affected by these problems in stable accommodation. It also reveals the social cost inherent in having people spend long periods of time as public place dwellers. A strategy to divert people from this course would be highly beneficial to the individuals themselves, but would also reduce the need to outlay lifelong support resources. A potential barrier to people moving out of homelessness characterised by substance abuse was created when people had to wait for rehabilitation accommodation after undergoing a detoxification program. This demonstrates that gaps between service providers can have a simple but powerful effect.

Another factor that was found to have influenced the homeless state of both the male Aboriginal researcher and a prominent local Aboriginal figure was the involvement of charismatic, commanding religious figures. Priests who provided not only practical support, but also spiritual and moral guidance helped both men out of homelessness. These figures and the religions they championed served as powerful influences in these men's lives. In some way such priests may have modelled some of the effective aspects of intensive case management, such as close attention to people's lives and making an effort to understand the things that have brought them into their current situation. This provides a channel and a focus that may be missing from a secular life.

Recommendations Regarding Service Provision

The need for appropriate Patrols and Outreach Services

Recommendation No. 1.1: Trained and properly resourced Aboriginal outreach workers

More trained Aboriginal counsellors or outreach workers are needed to maintain regular contact with the homeless, advise them and accompany them to service providers. A reliable source of recurrent funding must be identified. Also training and supervision must be provided.

Recommendation No. 1.2: Investigate feasibility of Night Patrol

The feasibility of an Aboriginal Night Patrol must be investigated. A number of difficult issues must be resolved. For example, it must be ascertained whether or not the patrol would only serve homeless people or also address other problems on the Block (a difficult agenda). It would also require one or more strong Elders or older people for leadership. The training, resourcing and support of someone who has already been carrying out this kind of work should be considered. Funds for vehicles, fuel and staff, as well as administration support must be located, either through the Crime Prevention Division within the NSW Attorney General's Department and local government, or from the NSW Department of Transport if the patrol became apart of a 'transport strategy'.

Recommendation No. 1.3: Develop a Transport Strategy and Service

Funds should be provided to improve existing transport services for homeless persons at risk, to train existing staff and employ Aboriginal ones, or to have such an organisation auspice a distinctly Aboriginal service. Additional aspects of a transport service that need to be considered include the transport of furniture to newly established accommodation, transporting people to funerals and monitoring the activities of juvenile street gangs.

The need for Diversionary Strategies

Recommendation No. 2.1: Aboriginal Sobering-up centre

While no specific mention of sobering up centres for Aboriginal people have appeared during this study, the research team believes a strategy for establishing such a facility for Aboriginal clients would be useful and could be linked to a night patrol or transport service. This could complement a managed Aboriginal Wet Centre in the vicinity of the Block.

The need for appropriate Alcohol & Drug Strategies

Recommendation No. 3.1: Inner city Sydney Aboriginal Drug and Alcohol Residential Rehabilitation Service

All existing Aboriginal drug and alcohol residential rehabilitation services are located outside the metropolitan area. The establishment of an inner Sydney Aboriginal service that can act as a 'halfway house' for people moving into these facilities must be investigated. People who have engaged in a detoxification process must be placed in a longer-term program or accommodation immediately without return to the streets where they will re-engage in substance abuse.

Recommendation No. 3.2: Additional funds to train and improve existing services

While the program profiling exercise did identify a number of short-term drug and alcohol facilities in operation in the relevant area of Sydney, none of these facilities appeared to have strategies for dealing with Aboriginal clients or encouraging them to utilise their services. Additional training could be provided to staff from existing services regarding culturally appropriate treatment of Aboriginal clients. Incentives for employing Aboriginal staff with the relevant training could be introduced. Such steps may serve to improve the situation for the Aboriginal homeless in the study area with drug and alcohol problems until Recommendation 3.1 is realised.

Recommendation No. 3.3: Link with the redevelopment of the Block

Any drug or alcohol rehabilitation facilities should consider the planned redevelopment of the Block. The implications of the role and powers of the new Redfern Waterloo Authority must be fully considered.

The need for appropriate Accommodation Options (Crisis or Emergency, Medium Term & Long Term)

Recommendation No. 4.1: Crisis Accommodation

The study area urgently requires culturally appropriate crisis accommodation facilities for all types of Aboriginal homeless people: men, women, families, youths and childless couples. The feasibility (or non-feasibility) of mixing these types of people should be closely investigated to establish how many facilities are actually required. In the meantime resources should be provided to some of the existing services to provide improved assistance to Aboriginal people.

Recommendation No. 4.2: Medium and Long Term Accommodation

Solid links must be provided for people moving between crisis accommodation and successful medium and long term accommodation options. More medium term options for women are required. Again, existing services could be funded to provide a more culturally appropriate service to Aboriginal clients.

Recommendation No. 4.3: Review of current AHO programs

The current programs that the Aboriginal Housing Office has operating need to be evaluated to consider how they might assist with the issues of hidden homelessness or the situation of the insecurely housed.

Recommendation No. 4.4: Transgender, gay and lesbian, sex worker services

Assistance must be provided to these groups of Aboriginal homeless people. The existing services may be resourced to improve or enhance their services to Aboriginal clients.

The need for appropriate Dedicated Service Centres and Gathering Places

Recommendation No. 5.1: Establishment of an Aboriginal Drop-in Centre

Two Aboriginal drop-in centres, one specifically for women, are required as a high priority. They must provide showers, laundry facilities, counselling, and relaxation facilities. They must also provide postal facilities and lockers. There is a need for a sensitive space to be created, both physical, social and mental, where relatively free of external pressure, homeless people can absorb information, obtain counsel, reflect on their circumstances, formulate goals and then seek assistance to find a pathway out of their predicament.

Recommendation No. 5.2: Establishment of Wet Areas

The establishment of wet areas must be further researched and considered. These efforts should be seen as part of a wider set of solutions to the Aboriginal homelessness crisis occurring in the study area.

The need for appropriate Physical Design of Public Places

Recommendation No. 6.1: Ensuring public place dwellers have access to basic public amenities

Despite the NSW State Government's 'Homeless Persons Protocol', and some significant efforts to adhere to it, the City of Sydney Council does not appear to have considered designing public places with the homeless and their needs in mind. A number of interviews revealed that through removing access to public toilets, the Council was attempting to reduce the use of certain city parks by homeless groups. Such an approach could be reconsidered; however the issues of safety and hygiene need to be investigated in parallel.

The need for better access to Phone-in Services

Recommendation No. 7.1: Link between phone-in services and outreach workers

Outreach workers must be trained to provide assistance with the relevant phone services that are available. Consider providing an Aboriginal Drop-in Centre with a freecall number to allow it to provide over-the-phone assistance.

The need for Skills and Training for Field and Outreach Workers

Recommendation No. 8.1: Develop and run training program for workers dealing with Aboriginal homeless people.

A program must be developed to train outreach and other workers who deal regularly with street dwellers. It should include the following topics: first aid, public place dweller lifestyle (street group identities and territories), and Aboriginal cultural awareness and sensitivity. Supplying such a program to non-Aboriginal workers would also improve their understanding of the circumstances people find themselves in and the concept of spiritual homelessness. Staff that manage accommodation facilities and drop-in centres require specialist training also. Having these programs run by the AMS should be investigated. One key aim of training would be to strengthen the cultural identity of Aboriginal fieldworkers and help them gain the necessary self-confidence and cultural skills to carry out their work. An allowance should be made for ongoing training and improvement of skills. Linkages should be pursued with the organisations listed in Chapter 3 that provide training to people working with gender issues and gay and lesbian homeless youth, as well as sex workers. An investigation of which organisation or education agency can develop such a training scheme must be made.

The need for Partnerships & Holistic Approaches

Recommendation No. 9.1: Coordination of Aboriginal homeless services

What is apparent is that a lead Indigenous agency or body that might drive any holistic approaches to the issue of Aboriginal homelessness in the study area is missing. This study has revealed a need for a Regional Plan for Inner-City Homelessness, approved by the NSW Department of Aboriginal Affairs, which links all State-based services with relevant Aboriginal services. Both the Commonwealth Department of Families and Community Services and the Local Government (City of Sydney) must be partners. An Indigenous coordination centre or team, founded in the community-controlled groups from the area, would be desirable. The Advisory and Reference Committees formed as a part of this study should be maintained and grow to include service providers and more government agencies. The Reference Committee could steer the directives of the overarching group. Its membership must be boosted to include representatives from each relevant Aboriginal organisation in the area to ensure ownership is shared. Further, a role of the overarching *Partnerships* committee would be to ensure that work is not duplicated. It should also consider the methods and means by which to resource smaller organisations to form partnerships with other agencies. A number of charitable organisations operate a range of programs that seek to address the various issues involved in the homeless experience. These organisations and the coordinated effort required to take a holistic approach could serve as useful models for addressing Aboriginal homelessness in the study area. However, more programs are needed with an Aboriginal focus and understanding of the spectrum of disadvantage they occupy. Also the NSW Government, through its *Partnerships Against Homelessness* initiative, has demonstrated its understanding of the importance of a whole-of-government approach. It should play a key role on the overarching committee.

Recommendation No. 9.2: Inventory of relevant services

It is essential that an inventory of services relevant to the Aboriginal homeless population of inner city Sydney is maintained and made available to workers who come in contact with Aboriginal homeless people. Such an inventory would be an essential tool for a Steering Committee attempting to make sensible planning decisions.

Categories with no Strategies

For a number of service response categories, the research team has not devised any strategies. It would be useful to consider a strategy or philosophy of Client Interaction as the themes of trust and cultural inappropriateness arose continually when the people interviewed discussed why the Aboriginal homeless did not access the many services available in the area. With regard to education strategies for non-Indigenous people, the City of Sydney's Social Planning Coordinator, described a great deal of conflict and disharmony existing between non-Indigenous people and the Indigenous homeless population of the study area. This suggests that developing these kinds of strategies could prove useful in reducing such tension.

Note Regarding Mental Illness Strategies

Given the number of homeless people suffering from a mental illness, as asserted by the research staff and a number of service providers, the research team was unable to document a clear regard for what this means in terms of people's ability to help themselves. There may be a need for this issue to be assigned a specific response category. People suffering with mental illness require ongoing support to help them maintain stable accommodation, and this fact requires attention and related funding.

Researchers Evaluate Effectiveness of Research Approach

The female researcher reported that the survey was positively received by everyone she encountered. The male researcher also recounted that awareness of the survey had been widespread. However, he did report that certain people had been very reluctant to be questioned about issues and episodes from their past lives as these were painful and elicited a range of strong emotions, particularly anger and resentment. He also noted that a number of people avoided being involved in the study, such as sex workers and transgender people. Further, he believed that there were many Indigenous public place dwellers who would avoid being counted or interviewed because they had lost faith in the Aboriginal organisations that were meant to assist them, believing that they only served people from certain families. The comment was also made that people under the age of 18 were not interviewed, despite the fact that they form a significant proportion of the homeless population.

The female researcher described the study area as accurately encompassing the key parts of metropolitan Sydney where Aboriginal homelessness occurs. However, she believed that it was difficult to count the numbers of homeless people in the area because of the shifting nature of the population. This researcher also emphasised that even the number of the area's Aboriginal residents was not known because they were reluctant to give information as part of the Census. With regards to the people who would fall into the insecurely housed category, the researcher stated that the statistics do not reflect the actual numbers of people without appropriate and secure housing.

Summary of impacts of existing services (effects and non effects)

The research team discovered that Aboriginal homeless people do not use the mainstream accommodation services, such as those run by the major charitable organisations, to a great extent. They access day services such as health clinics and meals, and to an extent use overnight accommodation facilities, but they do not participate in their longer-term accommodation and rehabilitation services or programs. The field researchers revealed a number of instances where the practices of government departments form barriers to people exiting their homeless situations. For example, Department of Housing requirements regarding responses to offers

of accommodation being submitted within seven days do not take account of how homeless people live and the difficulties they encounter with receiving and responding to official correspondence.

Summary of the recommended Strategy to alleviate Aboriginal homelessness

This study recommends that a coordination team be assembled to ensure that holistic approaches, relying heavily on partnerships between existing service providers and agencies, are enacted to assist the Aboriginal homeless population of inner city Sydney. This coordination team should comprise of an overarching Partnerships Committee that includes all the relevant State and Commonwealth government agencies, and a Steering Committee comprised of the relevant Aboriginal organisations operating in the area, as well as other mainstream services. The Steering Committee should be led by the Aboriginal agencies to found it in the concerns of the local community. This coordination team should supervise the creation of a number of culturally appropriate services, such as a range of accommodation options and a number of drop-in centres. Such facilities could serve as the bases from which the other elements of a homelessness strategy could operate. These other elements include a trained team of outreach workers, and in-house case management and counselling staff. It must be ensured that when people move between steps in the overall process, for example when they move from crisis accommodation into a drug rehabilitation program, they are not forced to return to the streets. Services for women and children escaping family violence must be improved, as should those targeting transgender individuals, sex workers, and gay and lesbian people. The effects of mental illness must be given more expert attention. A solution for the short to medium term may be to fund mainstream organisations to improve their services to the Aboriginal homeless.